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9-13 March 1982

REPORT OF THE TECHNICAL MEETING ON THE ELDERLY: LATIN AMERICA */

(San José, Costa Rica, 2 to 5 December 1980)

*/ This meeting was sponsored by the United Nations Centre for Social Development and Humanitarian Affairs with the co-operation of the Government of the Republic of Costa Rica. The views expressed in this report are those of the participating experts and do not reflect those of the United Nations.

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/Introduction

Introduction

1. The United Nations Technical Meeting on Aging for the Latin American Region was held in San José, Costa Rica from 2-5 December 1980. It was sponsored by the United Nations Centre for Social Development and Humanitarian Affairs and was hosted by the Government of the Republic of Costa Rica. (For the list of participants see Annex I.)

2. The purpose of this meeting was to convene a group of experts from the Latin American region and to prepare a report which will be used as a basic working document for the United Nations Latin American Regional Meeting of Policy Makers which will be held in 1981 in preparation for the United Nations 1982 World Assembly on Aging.

3. The experts had before them three working documents: "Demographic Fact Sheet for Latin America", "Aging and Development: The Humanitarian Issues", and "Aging and Development: The Developmental Issues". They were requested to assess these global documents and then to focus on the situation of the aging in their own region. The following is the report of the experts.

I. DEMOGRAPHIC TRENDS

4. It is necessary to consider the aging within the general demographic context of Latin America. The region is characterized by a young structure of population and by one of the more rapid rates of population growth in the world.

1. The population 60 and over

5. Aging is a worldwide phenomenon. Projections of current trends indicate that in all regions of the world the rate of increase of the 60 and over population is greater than that of the total population.

6. As indicated in the tables contained in Annex II, the Latin American region can anticipate a substantial increase of the percentage of population 60 years and over by the end of the century. In addition to a percentage increase there will be a substantial growth of the absolute numbers of older persons. Between 1980 and the year 2000 there will be an increase for the region as a whole of almost 19 million more older persons.

2. The aging of the population

7. The above-mentioned figures have serious implications for the aging individual per se and for the society at large for these changes are resulting in not only an increase in the number of older adults, but also in an "aging of the population". The "aging of the population" is defined as an increase in the ratio of older adults to the total population and most countries of the region are experiencing a gradual aging of their population. Population aging is the result of a decrease in mortality and fertility, a decrease in the birth rate and improved medical and social services. This phenomenon has serious economic and social implications with regard to development particularly in such areas as employment, delivery of services, geographical distribution of the population, consumption, production and savings among others.

/3. Other

3. Other demographic considerations

8. In addition to the above another major issue considered by the experts was the question of dependency. It was noted that, in general, there will be an increase in the specific dependency rate in the third age for the period 1980-2000, while the overall crude dependency rate for the population of the region as a whole will be decreasing. This will have numerous implications because the composition of the dependent group will be different and there will be an increase in the supply in the labour market.

9. It was also stressed that there are wide variations among the population structures of the region. For example the ratio of young to old age dependents varies tremendously throughout Latin America; from 12.3 children per every aged person in Nicaragua to 1.8 children per every aged person in Uruguay in 1980. By the year 2000 these ratios will have dropped by one-third throughout the region, but again with wide differences between countries.

10. For this reason the experts stressed that when considering the situation of the aging of the region it would be most beneficial to group countries with similar population structures. This could be done by using two criteria: (a) the percentage of older persons and (b) the rate of growth of the elderly population. In this way countries could be classified as those with an aging population structure, those with a young population structure and those who are in transition. This would facilitate planning in this field for the region.

11. The need for population statistics for planning differentiated by age, sex, urban/rural and family context was stressed. In addition, there is also need to define what additional indicators such as health, income, education are needed for planning. In this respect it was noted that in many countries of the region there is a severe lack of reliable data and statistics and it was recommended that action to remedy this should be taken.

12. It was also noted by the group that there are great differences within the population identified as aged, a broad range of 35 or more years and it is necessary when planning for the elderly to distinguish between the various age groups. For this purpose it was recommended that demographic data on the aging should be disaggregated into 5 year intervals (i.e., 60-64, 65-69, etc.).

13. Finally, it was noted that for the Latin American region there are more older people in urban areas than in rural areas.

II. DEVELOPMENTAL ISSUES

14. Development is a multi-dimensional and self-sustaining process. It is a set of interrelated processes affecting all major institutional spheres and patterns of social behaviour leading to sustained gains in economic output, level of living, and social modernization. It leads to change in the productive, the distributive, and the integrative capabilities of a social system.

15. As a result of development many regions of the world, including the Latin American region, as mentioned above, are witnessing an aging of their population. Economic growth and social modernization influence fertility, mortality, and some types of migration and result in the continuing increase in the numbers and percentages of older persons. This aging of the population can have an impact on social and economic development. It has implications with regard to production, consumption and savings, employment, investment, migration and rural development, among others.

/16. The

16. The aging of the population also has serious implications with regard to social development. The countries in Latin America are undergoing rapid changes in the social sphere and the implications of these changes are far reaching and dramatic in scope. No country is an exception and no group within the countries has been exempted from the impact of this change. The breadth and the symptoms of this social change vary from one Latin American country to another, but the fundamental nature of the change is the same in all of the nations.

17. Societies which have been characterized by their rural-agricultural-traditional social systems and economies are being transformed into less traditional societies and economic systems characterized by a trend toward urbanization, agrobusiness, industrialization and an increasing tertiary services sector. The changes are sometimes difficult and violent and sometimes relatively easy but the one thing that is definite about them is their inevitability. The effects of these changes in the Latin American societies are various; they include the disruption of family patterns, varying patterns of demographic transition, the rise of urban centres with accompanying congestion, pollution and physical insecurity, the massification of the job market, migration of large groups of people from one area of a country to another, rising expectations and accompanying unrest among the citizenry and the emergence of large bureaucratic institutions. On the positive side, the social change has brought, in most countries, a rise in living standards, improve health conditions, better educational standards, higher literacy, and considerable increases in life expectancy for some sectors of the population.

18. Because of social change and economic development, the Latin American region is witnessing an aging of their population. However, the experts noted that the increase in number and proportions of the aged in Latin America could threaten the benefits of social change and exacerbate its negative consequences, if population aging is not taken into acount by policy makers and planners.

19. Specifically, migration from rural to urban areas often leads to high densities of older persons in specific rural areas. This high concentration of older persons could lead to unfavourable economic development of those areas, if the skills and resources of the aging are not utilized.

20. Another important area, which could affect development, if not carefully planned, is the social security systems of many of the countries of the region. Special attention should be devoted to the investment of social security funds and its role in economic and social development.

21. As a result of these realities the experts recommended the following:

(a) Increased investment in agricultural areas to augment productivity and to slow migration within the countries. This should be done within the context of integrated rural development.

(b) Educational programmes to train the aged for employment and to retrain those who, because of change, have lost their ability to work. The overall impact of this measure will be to foment productivity.

(c) Educate industrial and service employers about the advantages of employing the aged.

(d) Improve existing pension programmes to ensure economic and social assistance for all groups within the context of the development process and to assure their continuity.

(e) Governments should encourage the initiative of aging citizens to adopt new methods of production and increase their knowledge as to what products are needed and how they may best be marketed for their own benefit.

/(f) Study

(f) Study of labour legislation policies to ensure the continued participation of the aged in development and avoid discrimination due to age.

(g) Technology, adapted to the capabilities of the aging, should be introduced into rural areas and industries which could benefit the development of these areas.

(h) Social service delivery systems must remain dynamic and attuned to the development process. As needs of certain groups diminish and others increase, delivery systems must be flexible enough to meet them. For example, as fewer primary schools are needed in rural areas because of demographic change, these institutions can be shifted to serve other needs such as those of the aged.

(i) Research on the effect of migration on the elderly who are left behind, as well as those "migrant workers" who, upon retirement, return to their country of origin is a crucial need for the region of Latin America.

III. HUMANITARIAN ISSUES

22. The humanitarian issues are those related to the specific needs of the aging. Although there are many matters that older persons share in common with all members of the population, certain issues affect their individual characteristics and requirements and these were the ones discussed by the experts. In particular, the topics considered were those outlined by the United Nations Secretary-General in his programme for the World Assembly on Aging. They are health, housing and environment, social welfare, income security, education and the family.

1. Health

23. Health should be considered within the framework provided by the definition of the World Health Organization as a biopsychosocial well-being and not simply as an absence of sickness. This is important to consider to the extent that the old have the capacity to contribute to and participate in the development process of the countries.

24. The group noted that in most countries of the region there are considerable inequities between rural and urban areas and between social groups in the availability of health services. Consequently, in many cases, the economically weak aged have quite inadequate access to health services. The group also noted that in the Latin American region preventive medicine and education is seriously lacking. It is unusual for the majority of people to receive regular checkups to prevent or forestall sickness. Consequently, the aged generally only solicit medical attention whey they are ill and when they require specialized medical and hospital services which, in many cases, are not available. Furthermore, the family in many cases is reducing its sense of responsibility for the medical care of the sick aged resulting in the transfer of responsibility to the State.

25. Taking into account these factors the group of experts realizes that:

(a) An integrated healthy state is necessary in order to insure the participation of the old in the development process -in other words participation in the socio-economic life of the country. The co-ordination and the support of the family and society complement this concept.

(b) In some persons 60 years of age and over a biologically healthy state is limited due to the setting in of pathological processes, including pluripathologies with a tendency toward chronic conditions and invalidity.

/(c) Health

(c) Health status is linked to cultural patterns and factors both of the social and economic variety (nutrition, creative and recreative activity, appropriate environment and working conditions).

26. Regarding the health of the aging the experts recommend the following:

(a) The promotion of preventive medicine, linked intimately to the concept of education and which includes the following points:

(i) Beginning at early stages of life the development of good eating and nutritional activities, physical programmes and the elimination of bad habits such as alcohol, tobacco and sedentarism.

(ii) Education with the aim of preventing accidents and ensuring a secure environment.

(iii) Early diagnosis and treatment of illness; regular medical checkups and the recognition of warning symptoms.

(iv) Education in pathological processes to ensure co-operation in the control of disease and to avoid complications.

(v) Rehabilitative education.

(b) The concept of primary health care should be the main strategy for achieving the goal of health for the aging as this is one of the most effective ways to include aging persons in the health care system.

(c) The promotion of and the creation of medical services with an adequate geriatric focus at the different levels.

(i) Primary level: provide knowledge to medical and paramedical personnel about medical-social aspects of aging.

(ii) Secondary level: promote geriatric services at the general hospital level with specialized outpatient treatment and hospitalization.

As a result of the use of these services the concept of the day hospital emerges as well as the geriatric hospital both with units for the recovery of the aged affected by chronic diseases or handicapped and psychogeriatric units designed to serve the special problems of their mental health. A great deal of geriatric care can however be offered effectively by minimally trained lay persons, by allied professionals and by family and friends. One does not need to wait on the full development of geriatric professionals to develop a broad range of useful services for the elderly within the means of the countries of the region.

(d) It is suggested to high education authorities that they include gerontology and geriatric curricula in their medical school programmes. This kind of curricula should be added at undergraduate and graduate levels.

(e) Promote research in the biology of aging as well as the psychosocial environment of aging, the family and society (social gerontology) because scientific knowledge constitutes the foundation of attention to the aged.

(f) Intercountry research to define the psychosocial and health profiles on elderly and provide base line data and specificially epidemiological information in order to facilitate planning, programming and evaluation of appropriate strategies for the care of elderly population.

(g) Sanitary services in urban and rural areas should be improved.

2. Housing and environment

27. Most of the countries of Latin America are characterized by extremely large housing shortages or deficits. Deficits run into the hundreds of thousands even in the smallest nations in the region.

/28. The

28. The causes of the deficits are multivaried and hence complex: these include rapid population growth, lack of economic resources of a large number of the population, the formation of new families at an early age, skilled manpower shortages, lack of construction materials, land costs and availability, and the inavailability of mortgage financing.

29. The result is overcrowding in available building stocks, the construction of large quantities of ramshackle housing of non-descript material, and, in many cases unplanned, unsanitary, uncomfortable environments for large numbers of citizens including the aging.

30. New building stock is generally limited in size and can accommodate only nuclear families -3 to 4 persons. The traditional situation, then, where the aged lived with their children is being suppressed by the overall housing problem. It was noted by the experts that this was not as much the case in rural areas and among the aged still active in the national work force.

31. In this matter, the experts recommended:

(a) That housing stock be designed which takes into accout the physical and psychological needs of the aged.

(b) That research be conducted into different alternative living patterns and housing for the aged.

(c) That new urban areas be planned which are characterized by small clusters which integrate housing, work and recreation needs of the residents.

(d) New urban centres should be more focused toward recreational needs as a means of promoting intergenerational contact.

(e) The aged should be integrated into the new urban areas in such a way as to permit them to resolve their own needs and yet to remain a vital part of the overall social fabric.

3. Social welfare

32. Social welfare services were defined by the group as a wide range of services -preventive, remedial, and developmental- for the well-being of the aging. The goal of such services should be to support the older person in order for them to remain as long as possible within their familiar environment. In addition they shall ameliorate their living conditions and promote integration in the social life of the community. In this sense it was also noted that in Latin America, in many instances, the lack of education and the tendency towards lack of popular participation limits the participation of the aging. Social welfare services to promote the aging's participation are needed.

33. The non-governmental organizations, in particular humanitarian organizations in Latin America, play a vital role in p oviding social welfare services for the aging. The importance of these organizations was consistently stressed by the experts. The increasing role of social security in providing social services to the aged mainly in those countries with broad scope of social security protection was also noted.

34. It was also stressed that social welfare services should take into account the differences between urban and rural areas. In rural areas in Latin America there is often a lack of social welfare services. Special programmes should focus on those elderly left behind through the out-migration of family members and supporters.

/35. In

35. In the urban areas other problems confronting the aging are inadequate environments and housing. concentrations of the very poor in shanty towns where there may be absence of meaningful roles and activities. Again social welfare services could help in ameliorating this situation. It was stressed that these services should be integrated with other services such as housing, health, nutrition, employment, recreation, etc.

36. In this area the group recommended that the following are needed:

(a) To elaborate plans at the community and national level in order to provide social services to the aging and their families and to promote the integration of aging in communal activities.

(b) Retraining programmes for the aged for new careers in particular to be providors of social services.

(c) More specific research focused on the social service needs of the aged and the optimum organizational approaches to meeting these needs.

(d) The development and carrying out of a collaborative partnership between the voluntary and governmental sectors in providing a broad range of social service options and alternatives for the elderly and their families.

(e) Promote the participation of the aging in voluntary organizations in order to use their knowledge and increase their sense of belonging.

(f) Establish non-formal social services in rural areas which are designed to meet the specific needs of the rural population.

4. Income security

37. Latin America is characterized by heavy economic dependency ratios in all age cohorts. Overall dependency is 3:1 -three persons depend on each worker.

38. As could be expected the participation in the work force drops at each progressively older age cohort. Nevertheless, it should be pointed out that over 20% of the population over 65 in Latin America is actively engaged in the labour force and over 45% of those in the age cohorts 55-64.

39. The reasons for this heavy participation at relatively late periods in life are various and complex and include limited social security coverage, inflation which undermines pension plans and tradition. Of principal interest is social security in its formal dimensions and the experts pointed out that coverage in Latin America varied generally from 30 to 50% of the population depending on the country. Extremes were Costa Rica with 80% coverage and Haiti with 1.5% coverage.

40. The social security system in all of the countries share certain characteristics which include the limited coverage, inequality of benefits among different groups of workers, and delays in adjusting contributions to actuarial requirements, use of long-term reserves to pay for short-term health related needs and unprofitable investments in such items as office buildings, hospitals and in some cases luxury housing stock.

41. Taking into account both the psychosocial and economic impact of income the experts recommended then:

(a) That the able aged be encouraged to work and to productively use their skills.

(b) That age discrimination in the labour market must be abolished.

(c) That training programmes be established for those who at an older age wish to enter the labour market for the first time.

/(d) That

(d) That retraining programmes be established for those workers who become unemployed, who must change occupations because of physical limitation because of age or because of shifts in employment demands.

(e) Retirement age and old age benefits should be set flexibly in accordance with length of service and type of occupations.

(f) Retirement should be gradual and voluntary within a certain time span.

(g) Social security coverage should be expanded in all of the countries even if this means that individual benefits will be limited.

(h) Contributions and benefits should be fixed at appropriate minimum and maximum levels according to the real economic capacity of the country and the need of protection of the aged.

(i) Health services should be separated from pensions, both financially and administratively.

(j) To orient the investment of social security funds on programmes of social and economic interest taking due regard to its safety, yield and liquidity.

(k) Government contribution and participation in the social security system should be regularized.

(l) A minimum pension should be provided to all elderly regardless of life time work status and contribution.

(m) In Latin America families contribute greatly to the economic security of older persons. Governments should support these efforts of the family through economic incentives where possible.

5. Education

42. One of the keys to Latin America's future development lies in education of its people. The region has always been characterized by high rates of illiteracy and outright ignorance in many social sectors.

43. In viewing the problems of the aged within this context there are several points to be made. Firstly, those persons who are 60 years of age and over are products of educational systems which were far different from the current ones. The result is a group badly prepared for the later years of life in terms of understanding what is happening to them physically, socially, and culturally. It is in the developing countries of the world, including much of Latin America, that rapid social and technological change and modernization has eroded the position and status of the elderly. The increasing informational and social obsolescence of the aged dictates that older people have access to basic literacy education, as well as access for all sectors of the population to continuous life-span education. Secondly, the population at large is, in general, ignorant of the problems of the aged. This too is a problem which will be effectively addressed only through the appropriate education of the entire population. Thirdly, since the educational systems of the area are not prepared to fully serve the population at large in many countries, they are even less prepared to retrain the aged or train the non-aged about the needs and problems of the aged.

44. Bearing this situation in mind the group of experts recommends:

(a) The carrying out of research in all of the countries of the region which will provide a needs assessment of the aged with regards to education and an attitudinal measurement of the population at large toward the aged.

/(b) The

(b) The preparation of educational programmes for professional personnel in social and medical fields to permit them to meet and understand the needs of the aging population in all of their complexities: emotional, psychological, physical.

(c) The preparation of educational programmes for the community with the aim of teaching its members about the problems of the aged.

(d) The preparation of programmes for the population of 60 years of age and more which later could be extended to younger groups and workers. These programmes could aim to re-educate and bring the students up to date about modern technology, permitting them to continue an economically active life either in their lifelong occupation or in a new one.

(e) Women and especially housewives should be provided with specific programmes which give them the option of acquiring capacities which will allow them either to participate in the productive process, or simply to improve their personal well-being.

(f) Promoting educational programmes of the general population and especially the aged about their fundamental rights including labour rights.

(g) The training of trainers in the educational system.

(h) Preparation of older workers for retirement through special courses which ease the transition and help them plan their new prospective lives.

6. The family

45. The family in Latin America is a strong force and esteem for the elderly within the family is still preserved in the majority of cases. Statistics indicate that, for the region as a whole, the majority of the elderly reside with their families. However, increasing trends of urbanization, modernization and migration indicate that the traditional concept of the place and relationship of the elderly in the family is undergoing major change. The traditional extended family itself has been going through a stage of transformation and becoming more nucleated, especially in terms of the sense of solidarity. In addition, because of increasing life expectancy, there are now many instances of four and even five generation families.

46. In spite of these changes, it was consistently emphasized that the family in the region continues to be a fundamental social institution which plays an important role in the life of the aging as well as in meeting a wide spectrum of their needs, including non-material needs.

47. The Expert Group recommended therefore:

(a) Ways and means must be sought to strengthen and/or preserve the family, and the place of the elderly within the family.

(b) Assistance to the elderly should, whenever possible, be within the context of the family for the most effective outside assistance may well consist in helping the family to help its members, the aging in particular.

(c) Research is needed in the following areas:

(i) Changing roles of the family

(ii) Richness of cultural Latin American traditions.

(d) Promotion of a sense of responsibility on the part of younger family members to their elderly.

(e) Inclusion of older people in governmental planning processes in the political, social, cultural and educational areas.

/Annex 1

Annex 1

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Annex 2

DEMOGRAPHIC TABLES

Table 1

PROJECTED NUMBERS AND PERCENT INCREASE OF THE POPULATION 60 YEARS OLD AND OVER BY SEX, 1980 AND 2000

(In thousands)

	1980			2000			Percentage increase 1980-2000		
	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
Grand total	22 756	10 633	12 122	41 488	19 301	22 187	82.3	81.5	83.0
Central America									
Costa Rica	124	57	66	250	118	132	101.6	107.0	100.0
El Salvador	246	110	136	487	223	264	98.0	102.7	94.1
Guatemala	326	159	167	734	360	374	125.2	126.4	124.0
Honduras	164	79	84	348	170	178	112.2	115.2	111.9
Mexico	3 536	1 650	1 886	6 792	3 159	3 633	92.1	91.5	92.6
Nicaragua	107	45	62	195	84	111	82.2	86.7	79.0
Panama	122	60	62	224	109	115	83.6	81.7	85.5
South America	15 737	7 309	8 427	28 773	13 358	15 415	82.8	82.8	82.9
Argentina	3 391	1 540	1 851	4 724	2 501	2 673	39.3	33.2	44.4
Bolivia	296	134	163	536	245	291	31.2	82.8	78.5
Brazil	6 974	3 271	2 703	14 314	6 754	7 560	105.2	106.5	104.2
Chile	901	392	509	1 473	646	827	63.5	64.8	62.5
Colombia	1 330	622	708	2 532	1 187	1 345	90.4	90.8	90.0
Ecuador	424	202	222	780	374	406	84.0	85.1	82.9
Guyana	53	24	28	86	39	47	62.3	62.5	67.9
Paraguay	164	77	87	298	141	157	81.7	83.1	80.5
Peru	976	467	509	1 713	834	879	75.5	78.6	72.7
Suriname	22	10	12	34	13	21	54.5	30.0	75.0
Uruguay	432	193	238	559	242	317	29.4	25.4	33.2
Venezuela	774	377	397	1 724	832	892	122.7	120.7	124.7
Caribbean	2 394	1 164	1 230	3 685	1 720	1 965	53.9	47.8	59.8
Barbados	34	14	20	34	14	20	-	-	-
Cuba	1 023	528	495	1 548	754	794	51.3	42.8	60.4
Dominican Republic	261	129	132	529	253	275	102.7	96.1	108.3
Guadeloupe	32	15	17	46	20	26	43.8	33.3	52.9
Haiti	323	147	176	481	219	261	48.9	49.0	48.3
Jamaica	192	87	105	248	107	140	29.2	23.0	33.3
Martinique	32	15	17	46	20	26	43.8	33.3	52.9
Puerto Rico	319	149	170	487	200	278	52.6	40.3	63.5
Trinidad and Tobago	87	42	45	145	69	78	66.7	64.3	73.3
Windward Islands a/	30	13	18	30	13	18	-	-	-
Other b/	61	26	35	91	42	49	49.2	61.6	40.0

Source: Population by sex and age for regions and countries, 1950-2000: Medium Variant, prepared by the United Nations Population Division 24 August 1979 (in press).

a/ Including Dominica, Grenada, Saint Lucie and St. Vincent.

b/ Including Antigua, Bahama Islands, British Virgin Islands, Cayman Islands, Montserrat, Netherlands, Antilles, St. Kitts-Nevis and Anguilla, Turks and Caicos Islands, and U.S. Virgin Islands.

Table 2

PROJECTED NUMBERS AND PERCENT INCREASE OF TOTAL POPULATION OF ALL AGES BY SEX, 1980 AND 2000

(In thousands)

	1980			2000			Percentage increase 1980-2000		
	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
Grand total	368 193	184 224	183 967	607 715	304 320	303 394	65.1	65.2	64.9
Central America	92 597	46 611	45 985	172 101	86 825	85 275	85.9	86.3	85.4
Costa Rica	2 213	1 115	1 098	3 377	1 697	1 681	52.6	52.2	53.1
El Salvador	4 801	2 412	2 389	8 713	4 390	4 323	81.5	82.0	81.0
Guatemala	7 262	3 682	3 581	12 739	6 456	66 282	75.4	75.3	75.4
Honduras	3 693	1 851	1 841	6 981	3 502	3 479	89.0	89.2	89.0
Mexico	69 994	35 224	34 769	132 305	66 766	65 539	89.2	89.5	88.5
Nicaragua	2 737	1 360	1 377	5 161	2 583	2 578	88.6	89.9	87.2
Panama	1 897	967	930	2 825	1 431	1 393	48.9	48.0	49.8
South America	244 994	122 296	122 697	392 484	195 885	196 599	60.2	60.2	60.2
Argentina	27 056	13 499	13 556	32 850	16 286	16 564	21.4	20.6	22.2
Bolivia	5 572	2 747	2 825	9 311	4 611	4 700	67.1	67.9	66.4
Brazil	126 377	63 014	63 363	212 491	105 893	106 598	68.1	68.0	68.2
Chile	11 107	5 501	5 606	14 938	7 394	7 544	34.5	34.4	34.6
Colombia	26 907	13 496	13 411	42 62	21 423	21 039	57.8	58.7	56.9
Ecuador	8 023	4 016	4 007	14 600	7 322	7 278	82.0	82.3	81.6
Guyana	884	442	441	1 252	627	625	41.6	41.9	41.7
Paraguay	3 067	1 532	1 534	5 283	2 652	2 631	72.3	73.1	71.5
Peru	17 773	8 921	8 852	29 468	14 788	14 680	65.8	65.8	65.8
Suriname	389	189	201	701	344	357	80.2	82.0	77.6
Uruguay	2 925	1 438	1 487	3 450	1 692	1 758	17.9	17.7	18.2
Venezuela	14 914	7 501	7 413	25 678	12 853	12 825	72.2	71.4	73.0
Caribbean	30 602	15 317	15 285	43 130	21 610	21 520	40.9	41.1	40.8
Barbados	253	121	133	297	144	152	17.4	19.0	14.3
Cuba	9 978	5 082	4 896	12 724	6 438	6 286	27.5	26.7	28.4
Dominican Republic	5 946	3 004	2 942	9 340	4 718	4 623	57.1	57.1	57.2
Guadeloupe	334	165	169	381	189	192	14.1	14.5	13.6
Haiti	5 817	2 863	2 953	9 876	4 901	4 975	69.8	71.2	68.5
Jamaica	2 192	1 074	1 118	2 871	1 416	1 455	31.0	31.8	30.1
Martinique	327	162	165	359	179	180	9.8	10.5	9.1
Puerto Rico	3 438	1 679	1 758	4 408	2 159	2 249	28.2	28.6	27.9
Trinidad and Tobago	1 139	581	558	1 377	695	681	20.9	19.6	22.0
Windward Islands a/	391	105	197	438	233	205	12.0	19.5	4.1
Other b/	787	391	396	1 059	538	521	34.6	37.6	31.6

Source: See Table 1.

a/ See Table 1.

b/ See Table 1.

Table 3

PROJECTED PERCENT OF THE TOTAL POPULATION IN THE AGE GROUP 60 YEARS AND OVER BY SEX, 1980 AND 2000

	Percent of population 60 years old and over					
	1980			2000		
	Both sexes	Males	Females	Both sexes	Males	Females
Central America	5.0	4.6	5.4	5.4	4.9	5.6
Costa Rica	5.6	5.1	6.0	7.4	7.0	7.9
El Salvador	5.1	4.6	5.7	5.6	5.1	6.1
Guatemala	4.5	4.3	4.7	5.8	5.6	6.0
Honduras	4.4	4.3	4.6	5.0	4.9	5.1
Mexico	5.1	4.7	5.4	5.1	4.7	5.5
Nicaragua	4.9	3.3	4.5	3.8	3.3	4.3
Panama	6.4	6.2	6.7	7.9	7.7	8.3
South America	6.4	6.0	6.9	7.3	6.8	7.8
Argentina	12.5	11.4	13.7	14.4	12.6	16.1
Bolivia	5.3	4.9	5.8	5.8	5.3	6.2
Brazil	5.5	5.2	5.8	6.7	6.4	7.1
Chile	8.1	7.1	9.1	9.9	8.7	4.0
Colombia	4.9	4.6	5.3	6.0	5.5	6.4
Ecuador	5.3	5.0	5.5	5.3	5.1	5.6
Guyana	6.0	5.4	6.3	6.9	6.2	7.5
Paraguay	5.3	5.0	5.7	5.6	5.3	6.0
Peru	5.7	5.3	6.0	4.9	3.8	5.9
Uruguay	14.8	13.4	16.0	16.2	14.3	18.0
Venezuela	5.2	5.0	5.4	6.7	6.5	7.0
Caribbean	7.8	7.6	8.0	8.5	8.0	9.1
Barbados	13.4	11.6	15.0	11.4	9.7	13.2
Cuba	10.3	10.4	10.1	12.2	11.7	12.6
Dominican Republic	4.4	4.3	4.5	5.7	5.4	5.9
Guadeloupe	9.6	9.1	10.1	12.1	10.6	13.5
Haiti	5.6	5.1	6.0	4.9	4.5	5.3
Jamaica	8.8	3.1	9.4	8.6	7.6	9.6
Martinique	9.8	9.3	10.3	12.8	11.2	14.4
Puerto Rico	9.3	8.9	9.7	11.0	9.7	12.4
Trinidad and Tobago	7.6	7.2	8.1	10.5	9.9	11.5
Windward Islands a/	7.7	6.7	9.1	6.8	5.6	8.8
Other b/	7.8	6.6	8.8	8.6	7.8	9.4

Source: See Table 1 and 2.

a/ See Table 1.

b/ See Table 1.

Table 4

PROJECTED NUMBERS AND PERCENT OF THE TOTAL POPULATION IN THE MAIN FUNCTIONAL GROUP OF TOTAL POPULATION, 1980-2000

	Population by broad age group (in thousands)								Percent of total population by broad age group							
	1980				2000				1980				2000			
	0-4	5-14	15-59	60 and over	0-4	5-14	15-59	60 and over	0-4	5-14	15-59	60 and over	0-4	5-14	15-59	60 and over
Central America																
Costa Rica	290	549	1 250	124	373	699	2 054	250	13.1	24.8	56.5	5.6	11.0	20.7	60.8	7.4
El Salvador	852	1 318	2 385	246	1 327	2 214	4 685	487	17.7	27.5	49.7	5.1	15.2	25.4	53.8	5.6
Guatemala	1 244	1 957	3 736	326	1 903	3 128	6 975	734	17.1	26.9	51.4	4.5	14.9	24.6	54.8	5.8
Honduras	710	1 057	1 766	164	1 164	1 789	3 679	348	19.2	28.6	47.8	4.4	16.7	25.6	52.7	5.0
Mexico	12 563	19 198	34 697	3 536	20 731	35 200	69 582	6 792	17.9	27.4	49.6	5.1	15.7	26.6	52.6	5.1
Nicaragua	523	791	1 318	107	859	1 415	2 692	195	19.1	28.9	48.2	3.9	16.6	27.4	52.2	3.8
Panama	267	488	1 021	122	312	577	1 713	224	14.1	25.7	53.8	6.4	11.0	20.4	60.6	7.9
South America																
Argentina	2 714	4 921	16 031	3 391	2 728	5 495	19 900	4 724	10.0	18.2	59.3	12.5	8.3	16.7	60.6	14.4
Bolivia	941	1 501	2 834	296	1 442	2 396	4 936	536	16.9	26.9	50.9	5.3	15.5	25.7	53.0	5.8
Brazil	20 043	32 355	67 005	6 974	28 700	50 565	118 912	14 314	15.9	25.6	53.0	5.5	13.5	23.8	56.0	6.7
Chile	1 266	2 348	6 592	901	1 399	2 788	9 279	1 473	11.4	21.1	59.4	8.1	9.4	18.7	62.1	9.9
Colombia	4 003	6 869	14 706	1 330	5 173	9 749	25 007	2 532	14.9	25.5	54.7	4.9	12.2	23.0	58.9	6.0
Ecuador	1 400	2 165	4 033	424	2 189	3 838	7 792	780	17.4	27.0	50.3	5.3	15.0	26.3	53.4	5.3
Guyana	125	230	476	53	115	244	806	86	14.1	26.0	53.8	6.0	9.2	19.5	64.4	6.9
Paraguay	523	839	1 542	164	757	1 340	2 889	298	17.1	27.4	50.3	5.3	14.3	25.4	54.7	5.6
Peru	2 873	4 676	9 247	976	4 021	7 192	16 543	1 713	16.2	26.3	52.0	5.5	13.6	24.4	56.1	5.8
Suriname	66	133	167	22	102	205	360	34	17.0	34.2	42.9	5.7	14.6	29.2	51.4	4.9
Uruguay	276	519	1 698	432	309	591	1 993	539	9.4	17.7	58.1	14.8	9.0	17.1	57.8	16.2
Venezuela	2 382	3 813	7 946	774	3 122	6 021	14 811	1 724	16.0	25.6	53.3	5.2	12.2	23.4	57.7	6.7
Caribbean																
Barbados	23	48	150	34	22	47	194	34	9.1	19.0	59.3	13.4	7.4	15.8	65.3	11.4
Cuba	909	2 282	5 763	1 023	1 046	2 151	7 979	1 548	9.1	22.9	57.8	10.3	8.2	16.9	62.7	12.2
Dominican Republic	937	1 724	3 025	261	1 179	2 139	5 495	529	15.8	29.0	50.9	4.4	12.6	22.9	58.8	5.7
Guadeloupe	36	71	195	32	29	64	241	46	10.8	21.3	58.4	9.6	7.6	16.8	63.3	12.1
Haiti	982	1 552	2 962	323	1 647	2 637	5 112	481	16.9	26.7	50.9	5.6	16.7	26.7	51.8	4.9
Jamaica	281	608	1 111	192	260	551	1 814	248	12.8	27.7	50.7	8.8	9.1	19.2	63.2	8.6
Martinique	33	70	192	32	27	60	224	46	10.1	21.4	58.7	9.8	7.5	16.7	62.4	12.8
Puerto Rico	352	710	2 057	319	333	687	2 901	487	10.2	20.7	59.8	9.3	7.6	15.6	65.8	11.0
Trinidad and Tobago	114	261	677	87	107	224	901	145	10.0	22.9	59.4	7.6	7.8	16.3	65.4	10.5
Windward Islands a/	61	119	182	30	46	102	261	30	15.6	30.4	46.5	7.7	10.5	23.5	59.6	6.8
Other b/	108	194	423	61	103	212	653	91	13.7	24.7	53.7	7.8	9.7	20.0	61.7	8.6

Source: See Table 1.

a/ See Table 1.

b/ See Table 1..

Table 5

CRUDE DEATH RATES, CRUDE BIRTH RATES AND EXPECTATION OF LIFE AT BIRTH BY COUNTRIES, 1970-2000 AS PROJECTED

	Crude death rates (per 1 000 population)			Crude birth rates (per 1 000 population)			Expectat on of life at birth (years)		
	1965-1970	1980-1985	1995-2000	1965-1970	1980-1985	1995-2000	1965-1970	1980-1985	1995-2000
Central America									
Costa Rica	7.2	5.0	5.0	38.3	28.1	23.8	65.6	70.9	72.8
El Salvador	12.9	8.0	5.2	44.9	40.1	34.2	55.9	64.8	71.3
Guatemala	15.0	9.3	6.3	44.6	38.4	33.6	51.2	60.7	68.0
Honduras	15.7	10.1	6.3	50.0	43.0	38.0	50.9	59.9	67.8
Mexico	9.7	6.8	5.2	42.8	41.1	35.2	61.0	67.0	70.3
Nicaragua	15.6	10.6	6.6	48.5	44.6	38.0	50.4	57.6	64.7
Panama	8.2	5.6	5.5	38.1	28.4	23.9	64.9	70.7	72.8
South America									
Argentina	8.6	9.1	9.7	22.0	20.4	17.4	67.4	69.9	70.7
Bolivia	19.6	14.5	11.1	47.3	41.7	37.1	46.6	52.6	57.8
Brazil	9.5	7.0	5.3	38.0	34.5	29.4	59.7	65.7	71.1
Chile	10.0	7.7	7.1	29.9	24.8	20.0	60.6	67.0	70.6
Colombia	10.3	7.1	5.4	39.5	33.2	26.5	57.9	64.2	69.7
Ecuador	13.8	8.9	5.6	44.2	40.6	33.5	54.6	62.5	69.0
Guyana	7.2	5.2	4.9	39.1	28.5	19.6	65.2	70.5	72.5
Paraguay	9.8	7.3	5.6	41.4	37.9	31.6	60.1	65.1	69.4
Peru	15.8	11.1	8.5	44.1	38.3	31.5	51.9	58.1	62.5
Suriname	8.8	6.1	3.9	43.6	41.3	31.7	63.6	68.8	72.3
Uruguay	9.4	10.2	9.9	21.3	19.9	18.8	68.5	70.3	72.7
Venezuela	7.9	6.0	4.9	39.5	35.0	26.3	63.0	68.0	72.3
Caribbean									
Barbados	9.1	8.8	8.1	24.1	19.0	15.2	67.6	71.1	72.9
Cuba	7.3	6.6	7.2	31.9	19.7	17.3	68.5	72.5	73.4
Dominican Republic	12.6	7.9	6.0	47.4	34.0	27.9	55.4	62.6	68.1
Guadeloupe	7.8	7.1	7.6	32.5	22.1	16.2	67.4	70.4	72.6
Haiti	19.2	14.1	10.3	43.7	41.3	39.1	46.2	52.7	58.4
Jamaica	8.0	6.4	5.9	37.3	26.2	19.1	67.8	71.2	72.9
Martinique	7.5	7.3	8.0	30.4	21.8	15.9	67.4	70.4	72.6
Puerto Rico	6.6	6.0	6.4	26.7	20.1	15.7	71.0	73.4	74.4
Trinidad and Tobago	6.9	6.1	6.8	28.0	20.1	16.3	67.8	70.0	72.6
Windward Islands a/	10.5	6.6	5.4	39.3	30.8	21.7	63.3	69.5	72.5
Other b/	7.3	6.3	5.8	30.9	27.2	20.6	66.2	70.2	72.6

Source: Selected World Demographic Indicators by countries, 1950-2000, prepared by the United Nations Population Division, 24 August 1979 (in press).

a/ See Table 1.

b/ See Table 1.

Table 6

PROJECTED NUMBERS AND PERCENT INCREASE OF POPULATION 60 YEARS AND OVER BY BORAD AGE GROUP 1980 AND 2000

	Population (in thousands)						Percentage increase, 1980-2000		
	1980			2000			1980-2000		
	60 and over	60-69	70 and over	70 and over	60 and over	60-69	60 and over	60-69	70 and over
Central America									
Costa Rica	124	75	49	250	146	104	101.6	94.7	112.2
El Salvador	246	147	99	487	281	206	98.0	91.2	108.1
Guatemala	326	204	122	734	440	294	125.2	115.7	141.1
Honduras	164	107	57	348	209	139	112.2	95.3	143.9
Mexico	3 536	2 022	1 514	6 792	3 994	2 798	92.1	97.5	84.8
Nicaragua	107	69	38	195	122	73	82.2	76.8	92.1
Panama	122	76	46	224	129	95	83.6	69.7	106.5
South America									
Argentina	3 391	1 951	1 440	4 724	2 428	2 296	39.3	24.4	59.4
Bolivia	296	183	113	536	332	204	81.2	81.4	80.5
Brazil	6 974	4 586	2 388	14 314	8 635	5 679	105.2	88.3	137.8
Chile	901	528	373	1 473	829	644	63.5	57.0	72.7
Colombia	1 330	872	453	2 532	1 534	998	90.4	75.9	117.9
Ecuador	424	252	172	780	467	313	84.0	85.3	82.0
Guyana	53	33	20	86	49	37	62.3	48.5	85.0
Paraguay	164	102	62	298	175	123	81.7	71.6	98.4
Peru	976	576	400	1 713	1 038	675	75.5	80.2	68.8
Suriname	22	13	9	34	18	16	54.5	38.5	77.8
Uruguay	432	243	189	559	277	282	29.4	14.0	49.2
Venezuela	774	487	287	1 724	998	726	122.7	104.9	153.0
Caribbean									
Barbados	34	18	15	34	17	17	-	-5.6	13.3
Cuba	1 023	572	451	1 548	845	733	51.3	47.7	55.9
Dominican Republic	261	162	99	529	316	213	102.7	95.1	115.2
Guadeloupe	32	19	13	46	24	22	43.8	26.3	69.2
Haiti	323	205	118	481	301	180	48.9	46.8	52.5
Jamaica	192	110	82	248	130	118	29.2	18.2	43.9
Martinique	32	19	13	46	24	22	43.8	26.3	69.2
Puerto Rico	319	182	137	487	271	216	52.6	48.9	57.7
Trinidad and Tobago	87	57	38	145	81	64	66.7	42.1	113.3
Windward Islands a/	30	17	13	30	13	17	-	-23.5	30.9
Other b/	61	36	26	91	53	38	49.2	47.2	46.2

Source: See Table 1.

a/ See Table 1.
b/ See Table 1.